PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further ndicated unless correcte naintenance fee notifica | ed below or directed oth | g the Patent, advance of erwise in Block 1, by (a | rders and notification of n a) specifying a new corres | naintenance fees will pondence address; an | be mailed to the current nd/or (b) indicating a sepa | correspondence address as trate "FEE ADDRESS" for |
|--|--|--|---|---|---|---|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| | 7590 03/10. NDERHYE, PC .EBE ROAD, 11TH VA 22203 | | I her State | Certification Certification Certification Certify that this is Postal Service with | icate of Mailing or Trans Fee(s) Transmittal is being a sufficient postage for firs | mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below. |
| | | | | | | (Depositor's name) |
| | | | | | | (Signature) |
| | | | | | | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | A | TTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/563,378 | 10/563,378 01/05/2006 | | Pieter Gijsman | 4662-123 | | 4400 |
| | | MOULDING COMPOSI | | | _ | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE F | EE TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1510 | \$0 | \$1510 | \$1510 | 06/10/2010 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | |
| NGUYEN, VU ANH | | 1796 | 524-440000 | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIC DSM IP ASSE | less an assignee is identi h in 37 CFR 3.11. Comp GNEE TS B.V. | fied below, no assignee detion of this form is NO | T a substitute for filing an a (B) RESIDENCE: (CITY HEERLEN, THE | ntent. If an assignee assignment. and STATE OR CO NETHERLANDS | UNTRY) | ocument has been filed for |
| Please check the appropr | iate assignee category or | categories (will not be pr | rinted on the patent): | Individual Lorp | oration or other private gro | oup entity Government |
| Ia. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies3 | | | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. (Previously paid on 02/01/10) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form). | | | |
| a. Applicant claim | tus (from status indicated s SMALL ENTITY statu | s. See 37 CFR 1.27. | | - | ENTITY status. See 37 CI | <u> </u> |
| NOTE: The Issue Fee an neterest as shown by the i | d Publication Fee (if requeecords of the United Sta | iired) will not be accepte tes Patent and Trademark | d from anyone other than the Office. | ne applicant; a registe | red attorney or agent; or th | e assignee or other party in |
| Authorized Signature | /Bryan H | H. Davidson/ | | Date | June 8, 20 | 010 |
| Typed or printed name | eBryan H | . Davidson | | Registration No. | 30,251 | <u>. </u> |
| This collection of inform in application. Confident submitting the complete this form and/or suggesti | ation is required by 37 C tiality is governed by 35 d application form to the tons for reducing this but irriging 22313-1450. DC | FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the | on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO | etain a benefit by the imated to take 12 min idual case. Any coming, U.S. Patent and Trans This ADDRESS of THIS ADDRESS. | public which is to file (and nutes to complete, including ments on the amount of tire addemark Office, U.S. Departs SEND TO: Commissioner | by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents P.O. Box 1450 |

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.